INTRODUCTION
Grommet insertion is a widely practiced procedure for the treatment of otitis media with effusion in children. When gaining consent, the potential risks and long term complications of grommets are discussed. We conducted this study to establish our long term complication rates in comparison with established data.

METHODS
- Retrospective analysis of paediatric patients undergoing grommet insertion at a tertiary centre between January 2014 & December 2016.
- Electronic patient records, including clinic letters and discharge summaries were reviewed.

RESULTS
We included a total of 386 paediatric patients in this study who underwent Grommet insertion between January 2014 and December 2016.

We found that of these 386 patients- 110 (28.6%) developed complications including i) Decreased hearing secondary to recurrence of OME (18%), ii) Infection (6%), iii) Persistent perforation (2.6%), iv) Retention of Grommets (1.8%) (Fig 1).

Of the total 386 patient sample size, 37 either cancelled or did not attend. 239 patients showed improvement in symptoms at 6 months follow-up and did not require any further input, this group suffered no complications post grommet insertion (Fig 2).

The complications recorded had developed over an average period of 14 months post grommet insertion. There was no association identified between patient co-morbidity and the risk of complication.

12.4% (48/386) of patients who initially had grommets required a further surgical procedure for their management (Fig 3).

4.1% (16/386) of patients were placed on a waiting list for further procedures as a result of their complications (Fig 3).

11.9% (46/386) were treated conservatively with measures such as antibiotics, hearing aids and Otovent (Fig 3).

CONCLUSION
We found significantly fewer (28.6%) patients suffered with complications post grommet insertion with shah grommets as compared to current literature [1] which quotes a post grommet complication rate of up to 80% in operated ears under specific circumstances and in certain subgroups of children.

Our rate of perforation (2.6%) is also less than 3% as quoted in [2].

Only 12.4% of our post op patients with complications required further surgical procedures. This number is still less than the rate of 30% as described in [3] and 28% in [4].

Our findings will have significant implications when gaining consent from parents for grommet insertion as a lower risk of complications and requiring further procedures may influence parents decision to proceed.

REFERENCES
1. Vardavakes P, Nikolaoupolus TP, Korres S, Tsoucarl E, Traganoudaki A, Frenkelis E. Grommets in otitis media with effusion: the most frequent operation in children. But is it associated with significant complications?